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South Carolina Public Service Commission 101 Executive Center Suite 101 Columbia, SC 29210 NOV 0 3 2008

PSC SC DOCKETING DEPT.

RE: docket 2007-445-A Stretcher Van's

Dear Commission group,

My name is Scott Smith and I am a paramedic in the Charleston Area. In reference to your consideration for the legislation to pass the use of "stretcher vans" in South Carolina, I would like to share with you my concerns and the concerns of other medics.

Since the beginning of Emergency Services in 1969, the quality of care and training has steadily improved with enriching technological to support what we do. Year after year our communities continue to request for "quality care" from field medical personnel. By allowing this legislation to move forward, we would decrease the quality that has long been promised. At the present time South Carolina Department of Health (SC DHEC), requires a transport service to employ certified employees that will maintain high quality care to patients and superior integrity to the service.

My first concern in this matter is how attendants on a stretcher van will react in the event of a medical emergency if the are not required obtaining medical training. As a stretcher van patient, an individual that acutely becomes ill will have to ride to a hospital with unknown time receiving no medical attention, or if the van has to pull to the side of the road to wait for EMS to respond may delay care for 20 minutes or more depending on the distance that van maybe from an Emergency Medical Service station. That same patient in a SC DHEC certified ambulance with medically trained personnel can immediately assess the problem and effectively stabilize that patient, then transport to the nearest appropriate hospital without delay in patient care. EMT's and paramedics for many years have crossed many obstacles to be considered credible medical personnel.

My second concern is how would such a van be regulated safely to transport patients throughout the state of South Carolina. Many ambulance services have strict guidelines such as the national "KKK" standards, OSHA, and SC DHEC to provide a safe and clean environment. By allowing untrained personnel to transport one patient after another without proper training, we will potential see an increase in the spread of bacteria and diseases throughout the community. Ambulance personnel are carefully trained and educated on cleanliness between patients.

Lastly, I have great deal of concern for the safety of patients that will be transported from van to facility. Imagine placing a stretcher in the middle of the room of several untrained people and ask them to lift and lower the stretcher. A volunteer approaches the stretcher and locates the release lever, pulls it causing it to collapse to the ground. With this severe jolt, the person on the stretcher now suffers with neck and back injury, Perhaps these personnel are transporting into a facility and the stretcher catches some gravel causing the stretcher to violently crash onto hard pavement causing multiple injuries to the fragile elderly patient. EMT's and paramedics have been trained to safely execute the lifting and lowering of stretchers saving our own backs and providing a safe experience for the patients. I challenge you to ask this question: Are we willing to cause harm and injury to patients to benefit saving money so that private industry such as Logisticare pocket higher profit margin for their investors? Who will pay for the increased liabilities and lawsuits due to untrained personnel that will neglect to provide professional quality care?

Thanks for your time and consideration.

Scott Smith, NREMT-P